

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004712

FILED
Feb 16, 2006
Secretary of State

Entity Name: MORTGAGE SOUTH FINANCIAL SERVICES, INCORPORATED

Current Principal Place of Business:

3631 BASTION LANE
RALEIGH, NC 27604

New Principal Place of Business:

Current Mailing Address:

3631 BASTION LANE
RALEIGH, NC 27604

New Mailing Address:

FEI Number: 57-1076656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TAYLOR, KELLY
433 NORTH EAST CANOE PARK CIR
PORT SAINT LUCIE, FL 34983 US

Name and Address of New Registered Agent:

FAVALE, MICHAEL
487 CANOE PARK CIRCLE
PORT SAINT LUCIE, FL 34983 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: MICHAEL FAVALE

02/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SINE, AARON
Address: 3631 BASTION LANE
City-St-Zip: RALEIGH, NC 27604

Title: VT () Delete
Name: MUELLER, JEFFREY
Address: 3631 BASTION LANE
City-St-Zip: RALEIGH, NC 27604

Title: S () Delete
Name: LOPICCOLO, CINDY
Address: 3631 BASTION LANE
City-St-Zip: RALEIGH, NC 27604

Title: VPOP () Delete
Name: MASIER, DARREN J
Address: 3631 BASTION LANE
City-St-Zip: RALEIGH, NC 27604

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON SINE

PRES

02/16/2006

Electronic Signature of Signing Officer or Director

Date